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TO: U.S. Patent and Trademark Office
Examiner: Steven Ho Yin Loke
Art Unit: 2811

DATE: October 24, 2005

FROM: Troy M. Schmelzer

TIME: _____

TOTAL NO. OF PAGES, INCLUDING COVER: 14

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MESSAGE:

RE: U.S. Patent Application Serial No.: 10/731,336; Our Ref. 81912.0017

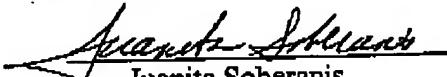
I hereby certify that the following documents:

Amendment Transmittal
 Amendment

are being facsimile transmitted to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, for filing in the above application.

October 24, 2005

Date of Deposit


Juanita Soberanis

TELCOPY/FAX NUMBER: 571-273-8300 Art Unit 2811

CLIENT NUMBER: 81912.0017

ATTORNEY BILLING NUMBER: 3212

CONFIRMATION NUMBER: (571)272-1436 (please return fax to Juanita Soberanis)

FORM PTO-1083

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
 Hideto SUGAWARA
 Serial No: 10/731,336
 Confirmation No: 3548
 Filed: December 9, 2003
 For: Nitride Based Semiconductor Light-Emitting Device
 (Amended)

Art Unit: 2811
 Examiner: Loke, Steven Ho Yin

I hereby certify that this correspondence
 is being transmitted via facsimile to
 (671) 273-8300:
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450, on

October 24, 2005

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Jugalta Soberanis

Name

Signature

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Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith in the above-identified application are the following items:

Amendment.
 No additional fees are required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	23	-	23 **	LG=\$50 SM=\$25	\$ 0
INDEPENDENT CLAIMS FEE	3	-	3 ***	LG=\$200 SM=\$100	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)					
\$250 FOR EACH ADDITIONAL 50 SHEETS					
TOTAL					
Independent Claims: 8, 10 and 12					

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

A check in the amount of \$____ to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.

A check in the amount of \$____ to cover the extension fee is enclosed. A copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
 HOGAN & HARTSON L.L.P.

By: 
 Troy M. Schmeizer
 Registration No. 36,667
 Attorney for Applicant(s)

Date: October 24, 2005

Biltmore Tower
 500 South Grand Avenue, Suite 1900
 Los Angeles, California 90071
 Telephone: 213 337-6700
 Facsimile: 213 337-6701

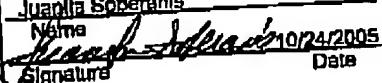
FORM PTO-1083

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
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 Serial No: 10/731,336
 Confirmation No: 3548
 Filed: December 9, 2003
 For: Nitride Based Semiconductor Light-Emitting Device
 (Amended)

Art Unit: 2811
 Examiner: Loke, Steven Ho Yin

I hereby certify that this correspondence
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 (371) 273-6300:
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450, on

October 24, 2005
 Date of Deposit
 Juanita Soberanis
 Name
 Signature 
 Date 10/24/2005

Mail Stop Amendment
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 Alexandria, VA 22313-1450

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Dear Sir:

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 No additional fees are required.

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TOTAL CLAIMS FEE	23	23	0	LG=\$50 SM=\$25	\$ 0
INDEPENDENT CLAIMS FEE	3	3	0	LG=\$200 SM=\$100	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)					
Independent Claims: 8, 10 and 12					
\$250 FOR EACH ADDITIONAL 80 SHEETS					
TOTAL					

- If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

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A check in the amount of \$____ to cover the extension fee is enclosed. A copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 60-1314. A copy of this sheet is enclosed.

Any filing fees under 37 C.F.R. § 1.18 for the presentation of extra claims

Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
 HOGAN & HARTSON L.L.P.

By:


 Troy M. Schmelzer
 Registration No. 36,667
 Attorney for Applicant(s)

Date: October 24, 2005

Biltmore Tower
 500 South Grand Avenue, Suite 1900
 Los Angeles, California 90071
 Telephone: 213 337-6700
 Facsimile: 213 337-6701

Appl. No. 10/731,336
Amtd. dated October 24, 2005
Reply to Office Action of July 27, 2005

Atty. Ref. 81912.0017
Customer No. 26021

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Hideto SUGAWARA
Serial No: 10/731,336
Confirmation No.: 3548
Filed: December 9, 2003
For: Nitride Based Semiconductor Light-Emitting Device (Amended)

Art Unit: 2811
Examiner: Loke, Steven Ho
Yin

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Alexandria, VA 22313-1450, on

October 24, 2005
Date of Deposit
Juanita Soberanis
Name
Signature
10/24/2005
Date

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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Dear Sir:

In response to the Office Action dated July 27, 2005, please amend this application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 8 of this paper.